

# Podcast episode transcript: Kelli Christman and Josh Amrhein

**Kelly Christman:** Welcome to today's episode of Solventum's Inside Angle. I'm your host, Kelly Christman. Today, I'm joined by our Health Information Systems Business Manager For Revenue Integrity, Josh Amrhein. Welcome, Josh.

**Josh Amrhein:** Hello.

**Kelly Christman:** Excited to have you. So there's been a lot of buzz, a lot of energy, a lot of conversations around denials management. Denials have been a massive challenge for health systems, healthcare providers. It's definitely something that's on everybody's minds. Talk to me a little bit about denials, the importance of having data, the importance of being proactive and what technology can do to support that.

**Josh Amrhein:** Yeah, so I think in the way of having technology and how it can be supported in the denials workflow, what we're seeing in the industry and what we're hearing from customers is, on average, we're seeing about 120 to \$140 per claim to be reworked. And time is money for health systems. Employees and resources are being asked to do more with less. And really using technology to be an additional aid in the workflow really helps with the productivity as well as making sure that those encounters or those patients that have that potential risk for denials are really being focused on and that the team or the staff member is really working the claim as close or as much upstream as possible.

**Kelly Christman:** \$120 to \$140 per claim, that's an insane amount of money when you think about it in the bigger picture. I think the other thing that you touched on is really having qualified coders and being able to find qualified coders. There've been a lot of reports coming out recently about the number of coders that are going to retire over the next decade and the inability to really replace them with qualified staff. Talk a little bit about that and how technology could potentially help with that workflow or workforce shortage.

**Josh Amrhein:** Yeah, I think using technology, especially for workforce shortage is going to be very important in the sense of we know everyone has their productivity numbers to really hit or to focus on. And I think sometimes a lot of individuals focus on making sure that that number is hit, but maybe just because that number is hit doesn't mean that the right claim or the right encounter or those that are most impactful have been reviewed at that time or really worked at that time. So I think in using technology, especially through the lens of denials, really helps to ensure that those higher risk encounters or claims are really focused on first and sort of worked and dropped and out the door as soon as possible.

**Kelly Christman:** It sounds like just from a lot of the conversations that have been happening this week, there's more of a focus on ensuring that the most complete, compliant and accurate documentation... It starts with that first patient encounter and really goes all the way to the payment, that final bill. Talk about that in relation to denials management. So how important is that information initially from the physician side, the clinicians that are documenting? How important is that in preventing these denials?

**Josh Amrhein:** Yeah, I think when you look at the evolution of denials or everyone that's impacted, to the point that you made, Kelly, it is all the way back to the provider and in the documentation being created. I mean, you could even argue that it's even more upstream, and it's back to the registration point when that patient is actually being registered. I think that comes into play a little bit more on the outpatient setting than maybe the inpatient setting. We really are seeing in the denial space, and with the denials focus, that there are about seven different teams that are really involved in the evolution of denials.

We recently did a crosswalk, I guess you could say, of all the different workflows and all the different team members that really are impacted by denials or maybe are the responsible party as it relates to the data. And so, from registration through provider documentation, looking even into case management and then through CDI and coding, there are multiple different workstreams. There's multiple different data points that really are impacted by denials and obviously ensuring that the most appropriate and accurate documentation, let alone... Let's say patient identification is most important.

**Kelly Christman:** It all comes back to data. There's a saying that it's easier to fix a problem before it happens than to fix it after it's happened, and I think this is the case with denials. So can technology really help prevent denials?

**Josh Amrhein:** So I think the important part is, and what I personally have pointed out to customers, is that denial prevention is important, especially for health systems in the bottom line today. Using technology isn't necessarily going to go out and find a significant number of additional dollars for health organizations, but it's really about securing payment and stopping the leakage. So from the customer end in using technology upstream and the data points behind it, we're just focusing on ensuring that you're getting the most accurate payment that you are expecting at the time of service. So it's really helping with the health organizations, let's say, plan a little bit better from the prevention aspect. So it's not going to be growing the financial dollars as much as really the measurement being securing the payment that's expected.

**Kelly Christman:** That's great. Josh, thanks so much for joining us today. We really appreciate it and look forward to chatting more about denials in the future.

**Josh Amrhein:** Thanks so much.